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CHANGE OF CORRESPONDENCE ADDRESS**

<b>Application Number</b>	10718254
<b>Filing Date</b>	November 20, 2003
<b>First Named Inventor</b>	Lionel M. NELSON
<b>Title</b>	Devices, Systems and Methods...
<b>Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	011932US2

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

24737

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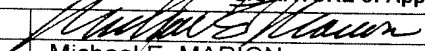
I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	March 30, 2010
Name	Michael E. MARION	Telephone	(914) 333-9619
Title and Company	Authorized Signatory, Koninklijke Philips Electronics N.V.		

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

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